PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

020 431,0729

	•	CLAIMS AS	Column (Column		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			27		!			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA	B	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			27 minus 20=		• 7			X\$ 9=		OR	X\$18=	126
INDEPENDENT CLAIMS			3 minus 3 =		Φ			X40=		OR	X80=	
MU	TIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
• If (the difference i	n column 1 is	less than ze	ro, ente	r "0" in c	"0" in column 2		TOTAL		OR	TOTAL	836
	CL	AIMS AS A	MENDED					, , , , , , , , , , , , , , , , , , ,	PARTITY	OR	OTHER SMALL	
		(Column 1)		(Colu	mn 2)	(Column 3)	, <u> </u>	SMALL E			SIMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DIME	Total	• 27	Minus	- 2	7	= 		X\$ 9=		OR	X\$18=	
ME	Independent	· 3	Minus		3	=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE	
			JUII. FEE 1		,	ADDII. 1 C.						
	received the act	(Column 1) CLAIMS	STATE OF	HIG	IMN 2) HEST	(Column 3)	ו ר		ADDI-	i		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER HOUSLY D FOR	PRESENT EXTRA	\prod	RATE	TIONAL FEE		RATE	TIONAL FEE
NO.	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	•••	- C' AIM	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						, [+135=		OR	+270=	
TOTAL ADDIT, FEE										OR	TOTAL ADDIT, FEE	
		(Column 1)		(Coli	umn 2)	(Column 3)				_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER TIOUSLY D FOR	PRESENT EXTRA	٦г	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		e][X\$ 9=		OR	X\$18=	
MEP	Independent	•	Minus	***]=	11	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┙┝	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										1	TOTAL	
••	If the "Highest Nu "If the "Highest Nu	mbor Provincely I	Paid For (N TH	IS SPACE	E is lass tha	an 20, enter 720	D." A	DOIT. FEE		OR	ADDIT. FEE	: L
	The Highest Nun	nber Previously P	aid For (Total o	и Indeper	rdent) is th	e highest numb	oer foun	d in the ap	propriate bo	x in a	olumn 1.	